	CHEDULE A (FEC Form 3 ) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 353 / 796 (check only one)    X
An or	y information copied from such Reports and story commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Perlmutter for Congress			
۹.	Full Name (Last, First, Middle Initial) Kristin F. Robbins, DDS Mailing Address 2348 Ash			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Zip Code			Transaction ID: C7342
	Denver	CO	80207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self  Receipt For: 2006  Primary X General Other (specify) ▼	Occupation Dentist  Election C	Dycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
3.	Full Name (Last, First, Middle Initial) Patricia A Robbins Mailing Address 5001 Garrison ST #1			Date of Receipt
	City State Zip Code			0 9 3 0 2 0 0 6 Transaction ID: C8755
	Wheat Ridge	CO	80033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Self  Receipt For: 2006 Primary X General Other (specify) ▼	Occupation Retired  Election C	n Cycle-to-Date ▼ 45.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
_	Full Name (Last, First, Middle Initial) Steven S Robbins	1		Date of Receipt
<b>.</b>	Mailing Address 7612 Coors Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C8466
	Arvada FEC ID number of contributing federal political committee.	CO	80005	Amount of Each Receipt this Period  800.00
	Name of Employer National Renewable Energy Lab Receipt For: 2006 Primary X General Other (specify)	Occupatio Engineer Election C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)				
T	OTAL This Period (last page this line number	r only)		